

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Future45			FEC IDENTIFICATION NUMBER ▼ C C00574533		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee 45Committee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 15 / 2015		
Mailing Address P.O. Box 710993			Amount 38000.00		
City Herndon		State VA	Zip Code 20171		Transaction ID : SE.4181
Purpose of Expenditure media production/film footage		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 17 / 2015	
Name of Federal Candidate Hillary Clinton			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Arena Online			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 15 / 2015		
Mailing Address 1780 West Sequoia Vista Circle			Amount 2300.00		
City Salt Lake City		State UT	Zip Code 84104		Transaction ID : SE.4184
Purpose of Expenditure Media placement		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 17 / 2015	
Name of Federal Candidate Hillary Clinton			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			40300.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Maria Wojciechowski</u> <div style="text-align: right;">[Electronically Filed]</div>			Date M M / D D / Y Y Y Y Y Y 12 / 17 / 2015		